Additional inventors are being named on.



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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

As the below named inventor(s	s), I/we declare that:		
This declaration is directed to:			
	Hashad application or		
Apolic A	ttached application, or ation No.	filed on	
ه لیا	amended on		(if applicable);
I/we believe that I/we am/are the which a patent is sought;	ne original and first invent	tor(s) of the subject ma	atter which is claimed and for
I/ we have reviewed and under amended by any amendment s	stand the contents of the pecifically referred to abo	above-identified applicove;	cation, including the claims, as
to me/us to be material to pa	atentability as defined in a filing date of the prior a	n 37 CFR 1.56, included polication and the Na	nark Office all information known ding material information which tional or PCT International filing
belief are believed to be true,	and further that these s re punishable by fine or i	statements were made mprisonment, or both,	made herein on information and e with the knowledge that willful under 18 U.S.C. 1001, and may
FULL NAME OF INVENTOR(S	<u> </u>		
Inventor one: KHUE	VU NGUY	/EN	· .
Signature:	ue	Citizen of:F_Y	ance
Inventor two: _CHAR	LES MICH	TEL WOL	FF
Signature: 91,	Days	Citizen of:F_V	ance
Inventor three: PHIL	IPPE PO	INDRON	
Signature: How	dur	Citizen of:Fva	ance
Inventor four:			
Signature:		Citizen of:	

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

_additional form(s) attached hereto.

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

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Attorney Docket Number

COMPLETE IF KNOWN

First Named Inventor

Application Number

Filing Date

Declaration Declaration Submitted after Initial Submitted Group Art Unit with Initial Filing (surcharge (37 CFR 1.16 (e)) Filing Examiner Name required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Utilization of nucleotide probes for the measurement of specific mRNA for the molecular diagnosis of autosoinal recessive spinal musular atrophi (Title of the Invention) the specification of which is attached hereto as United States Application Number or PCT International was filed on (MM/DD/YYYY) (if applicable). Application Number and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate. or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority Certified Copy Attached?** Number(s) Country (MM/DD/YYYY) **Not Claimed** YES Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]
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Direct all correspondence to: Customer Number or Bar Code Label	OR Correspondence address below
Name Dr. KHUE VU NGUY	EN
Address 2828 University Avenue	e, Apt# 303
Address	
City SAN DIEGO	State CA ZIP 92104
	619)543-3623 (619)299-0449 Fax (619)543-7868
are believed to be true; and further that these statements were	viedge are true and that all statements made on information and belief made with the knowledge that willful false statements and the like so U.S.C. 1001 and that such willful false statements may jeopardize the
NAME OF SOLE OR FIRST INVENTOR:	☐ A petition has been filed for this unsigned inventor
Given Name (first and middle [if any]) KHUE VU	Family Name NGUYEN
Inventor's Cluc Signature	$D_{\text{Date}} = 03/03/2001$
Residence: City SAN DIEGO S	tate CA Country Citizenship FRENCH
Mailing Address 2828 University Ave	une, Apt # 303
Mailing Address	
city SAN DIEGO State CA	ZIP 92104 Country U.S.A.
NAME OF SECOND INVENTOR:	☐ A petition has been filed for this unsigned inventor
Given Name (first and middle [if any]) CHARLES - Michel	Family Name WOLFF
Inventor's The Seal of	Date 05/03/2001 FRANCE FRENCH
Residence: City STRASBOURG St.	FRANCE FRENCH Country Citizenship
Mailing Address 15, AVE DU GENERAL DE	GAULL E
dailing Address	
City STRASBOURG State	ZIP 67000 Country FRANCE
Additional inventors are being named on thesupplemental.	
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PTO/SB/02A (11-00)
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to a collection of information unless it contains a valid OM8 control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ____ of ____

any:		A petitio	n has been file	ed for	this unsigned inventor	
y))		Family Name or Surname				
_		POINDRON				
					Date June, 06, 2001	
Sta	te	Country	France		Date June, 06, 2001 Citizenship French	
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ny:	C	A petition i	has been filed	for thi	is unsigned inventor	
1)		Family Name or Sumame				
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		A petition ha	s been filed fo	or this	unsigned inventor	
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PTO/SB/15 (02-01)

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ASSIGNMENT OF APPLICATION	Docket Number (Optional)
Whereas, I/We, KHUE YU NGUYEN of SANDTEGO	CA, U.S. A., hereafter
referred to as applicant, have invented certain new and useful improvement	sin Utilia atem al
molecular diagnosis of autoromal necessive spinal for which an application for a United States Patent was filed on	nuncular obsophy
Application Number/	
for which an application for a United States Patent was executed on	3/30/2001 , and
Whereas, NEUROFTT S.A. of TLLKTRCH FR to "assignee" whose mailing address is Les Alasanthames me Tender desirous of acquiring the entire right, title and interest in the same;	ANCE herein referred in Sapidus is , 67400 Illkinch, FRANCE
Now, therefore, in consideration of the sum of	eant(s), by these presents do sell, aid invention in the United States in may be granted therefor in the ent and Trademarks to issue said in and to the same, for his sole the full end of the term for which have been held by me had this
Executed this 30th day of March	20.01
executed this 30th day of March at SAN DIEGO, CA, U.S.A.	
	Cline
State of) SS:	(Signature)
County of)	
Before me personally appeared said	
and acknowledged the foregoing instrument to be his free act and deed this	of the classification
Seal CA ALL-PURAS	affached SE ACKNOWEDEMEN (Notary Public)
Note: Signatures of all the inventors or assignees of record of the entire interest or their represe	, , , , , , , , , , , , , , , , , , ,
torms if more than one signature is required. See below*.	.,
" Light Total offorms are submitted.	

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ASSIGNMENT OF APPLICATION	Docket Number (Optional)
Whereas, IWe, <u>CHARLES-MICHEL WOLFF</u> of <u>STRASBOURG</u> referred to as applicant, have invented certain new and useful improvement probes for the measurements of specific mRNA for the molecular decentive spinal museular atrophy.	
for which an application for a United States Patent was filed on Application Number/	
for which an application for a United States Patent was executed on _o	3/3 <i>0/2001</i> , and
Whereas, NEUROFIT S.A. of ILLKIRCH, FRANCE to assignee whose mailing address is Les Algerithmes, rue Jean Sapedesirous of acquiring the entire right, title and interest in the same;	herein referred idux, Par d'Innestis ILLKIRCH, FRANCE
Now, therefore, in consideration of the sum of <u>one</u> dollars (\$_acknowledged, and other good and valuable consideration, I/We, the applicassign and transfer unto said assignee the full and exclusive right to the said and the entire right, title and interest in and to any and all Patents which United States, I/We hereby authorize and request the Commissioner of Pate United States Patent to said assignee, of the entire right, title, and interest use and behoof; and for the use and behoof of his legal representatives, to said Patent may be granted, as fully and entirely as the same would hassignment and sale not been made.	cant(s), by these presents do sell, aid invention in the United States in may be granted therefor in the ent and Trademarks to issue said to in and to the same, for his sole the full end of the term for which have been held by me had this
Executed this 30th day of March	, 20 <u>0 </u>
at STRASBOURG, FRANCE	•
9	7. Say
State of) County of FAANCE) SS:	(Signature)
Before me personally appeared said WOLFF charles Nich	Ŋ
·	<u> 41 · </u>
and acknowledged the foregoing instrument to be his free act and deed this day of 05 MAI 2000 ID: TT 25 29	8.
Seal	(Notary Public)
Note: Signatures of all the inventors or assignees of record of the entire interest or their represer forms if more than one signature is required. See below	ntative(s) are required. Submit multiple

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ASSIGNMENT OF APPLICATION	Docket Number (Optional)
Whereas, IWe, Philipse POINDRON of PLORSHEIM. (referred to as applicant, have invented certain new and useful improvement muchable makes for the unananement of encice m RNA of autosomal number spinal muscular account	nts in <u>ultilijation</u> of
for which an application for a United States Patent was filed on Application Number/	
for which an application for a United States Patent was executed on _	
Whereas, NEUROFIT SA of ILLKIRCH France to assignee whose mailing address is to Algoritance rul Jean Base of Innovation of 67400 /ILKIRCH desirous of acquiring the entire right, title and interest in the same;	Symichus, is
Now, therefore, in consideration of the sum ofdollars (\$_acknowledged, and other good and valuable consideration, I/We, the appl assign and transfer unto said assignee the full and exclusive right to the sand the entire right, title and interest in and to any and all Patents which United States, I/We hereby authorize and request the Commissioner of Patented States Patent to said assignee, of the entire right, title, and interest use and behoof; and for the use and behoof of his legal representatives, to said Patent may be granted, as fully and entirely as the same would assignment and sale not been made.	icant(s), by these presents do sell, said invention in the United States on may be granted therefor in the stent and Trademarks to issue said st in and to the same, for his sole to the full end of the term for which
Executed this 30 th day of	, 20_ 0 /
Executed this 30 th day of wands at PLORSHEIM 67115, (France)	·
	Thruder
State of) SS:	(Signature)
County of Fance) Before me personally appeared said Philipse POIND & DU	Pour la légalisation de la
1/1	sienature
and acknowledged the foregoing instrument to be his free act and deed this day of, 20	Piobsieim, le Lo Malro
Seal	(Notary Public) (Notary Public)
Note: Signatures of all the inventors or assignees of record of the entire interest or their repres forms if more than one signature is required, See below*.	sentative(s) are required. Supply

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forms are submitted.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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State of California)
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County of SAN Siego	J
On	Name and Title of Officer (e.g., "Jane Doe, Notary Public") VGUYEN Name(s) of Signer(s)
personally appeared Khue Vu I	Name(s) of Signer(s)
	personally known to me proved to me on the basis of satisfactory evidence
ELIZABETH BRACAMONTE Commission # 1285327 Notary Public - California San Diego County My Comm. Expires Nov 24, 2004	to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
Place Notary Seal Above	WITNESS my hand and official seal. Classification of Notary Public
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Capacity(ies) Claimed by Signer Signer's Name: KHUE YU NOUY	RIGHT THUMBPRINT OF SIGNER Top of thumb here
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